FRANKFORT SEWER DEPARTMENT

Application for Plan Review

	Exploratory Sketch Plan Exploratory Sketch Plan Preliminary Plan Record Plan Revised Plan	Plan Type ☐ Major Land Development ☐ Minor Land Development ☐ Re-subdivision ☐ Site ☐ Utility	Type of Developmer ☐ Residential ☐ Commercial ☐ Industrial	<u>nt</u>
			Date Rec	'd
1)	Name of Plan			
	Former Plan Name (if applicable)			
2)	Name of Legal Property If legal owner is a business	Owner(s) entity, name of responsible employee of	acting for the business	Telephone
	Address			
	City/State/Zip Code			
3)		entity, name of responsible employee o	acting for the business	Telephone
	Address			
	City/State/Zip Code			
4)	Firm or Person Respons	ible for the Preparation of the Plan	(Professional Engineer):	
	Name and Title			
	Firm			
	Address			
	City/State/Zip Code			
	Telephone		Fax	
	Email			

	Signature of Professional Engineer
	Print Name
	Fint Name
	License Number
	Date
MANDATORY	
PLAN SUBMISSION DATA	
() Residential	
() Non-Residential	
Site Acreage:	
Disturbed Acreage:	
Number of Lots:	
Estimated	
Number of Pumps:	
Estimated	
Sanitary Sewer Flow:(GPD)	
Building Footprint:	
(if applicable)	